

SERIAL NUMBER 09/190,567	FILING DATE 11/12/98	CLASS 235	GROUP ART UNIT 2876	ATTORNEY DOCKET NO. 97-2517
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APPLICANT

BLAIN BARTON, BELLEVUE, WA.

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*** *No*  
VERIFIED  
  01  

  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*** *No*  
VERIFIED  
  01  

  
  
  

**\*FOREIGN APPLICATIONS\*\*\*\*\*** *No*  
VERIFIED  
  01  

  
  
  

FOREIGN FILING LICENSE GRANTED 12/07/98 \*\*\*\*\* SMALL ENTITY \*\*\*\*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 4	TOTAL CLAIMS <i>16/17</i>	INDEPENDENT CLAIMS 3
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Verified and Acknowledged *[Signature]*  
Examiner's Initials                      Initials

  

ADDRESS

KAARDAL & ASSOCIATES, P.C.  
IVAR M KAARDAL  
~~522 S MINNESOTA AVE SUITE 1~~  
~~SIOUX FALLS SD 57104-4825~~  
**3500 South First Ave. Circle-Suite 250**  
**SIOUX FALLS, SD 57105-5807**

  

TITLE

POINT OF SALE AUTOMATIC SAVINGS PROGRAM CONTRIBUTION SYSTEM

  

FILING FEE RECEIVED  \$380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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